

## Reimbursement Claim Lake Management Program Lake Protection Grant

Form 8700-242 (R 9/02)

**Notice:** Use of this form is required by the Department for any claim for reimbursement filed pursuant to ch. 281, Wis. Stats., and ch. NR 191, Wis. Admin. Code. The Department will not consider your reimbursement claim unless you complete and submit this form. Personally identifiable information collected will not be used for program administration and is not intended to be used for any other purpose.

**Instructions:** (See reverse side)

DNR will use the mailing address we have on file.		Grant Number		<b>Leave Blank DNR Only</b>		
		Grantee/Management Unit		Approved-Report (Lakes Coord.) / Date		
		Claim Number		Approved-Payment Request (EGS) / Date		
County		<input type="checkbox"/> Partial <input type="checkbox"/> Final		Approved-Payment Request (Finance) / Date		
				Amount of Payment \$		
Expense Category	Expenditures		This Claim	Cumulative to Date	This Claim	Cumulative to Date
	This Claim	Cumulative to Date				
Acquisition	\$	\$	\$		\$	
Professional Fees						
Construction						
Plant Material						
Ordinance Development						
I/E						
Other (specify):						
1. Total Expenditures						
A. Approved Project Amount						
B. Cost Overrun (Line 1 minus Line A)						
C. Additional Aid Amt. Requested (Attach explanation)						
2. Grantee Share						
3. Grant Share						

**Certification** - I certify that to the best of my knowledge and belief the billed costs of expenditures are based on actual payments of record and are in accordance with the terms of the project and the reimbursement represents the grant share due which has not been previously requested.

Signature of Authorized Official		Date Signed
Printed or Typed Name of Authorized Official		Title
Office Phone		Home Phone

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Form 8700-242 (R 9/02)

**Instructions:** (Please include the Project Number on all attachments.)

Submit one copy of this form (8700-242), along with the Reimbursement Claim Worksheet (Form 8700-243), to the appropriate DNR region office (see below) with one copy of the following attachments:

- Copies of bid proposals, professional services, contracts, change orders and/or detailed force account time sheets
- Copies of invoices or bills for all eligible expenses
- Copies of cancelled checks for all eligible expenses (If copies of canceled checks are not available, copies of applicable bank statements may be substituted.)
- Copy of recorded grant agreement or recorded deed from Register of Deeds (land acquisition only)
- Copy of title insurance or Opinion of Title (land acquisition only)
- Copy of relocation cost statement, if applicable (land acquisition only)

## Department of Natural Resources Regional Offices

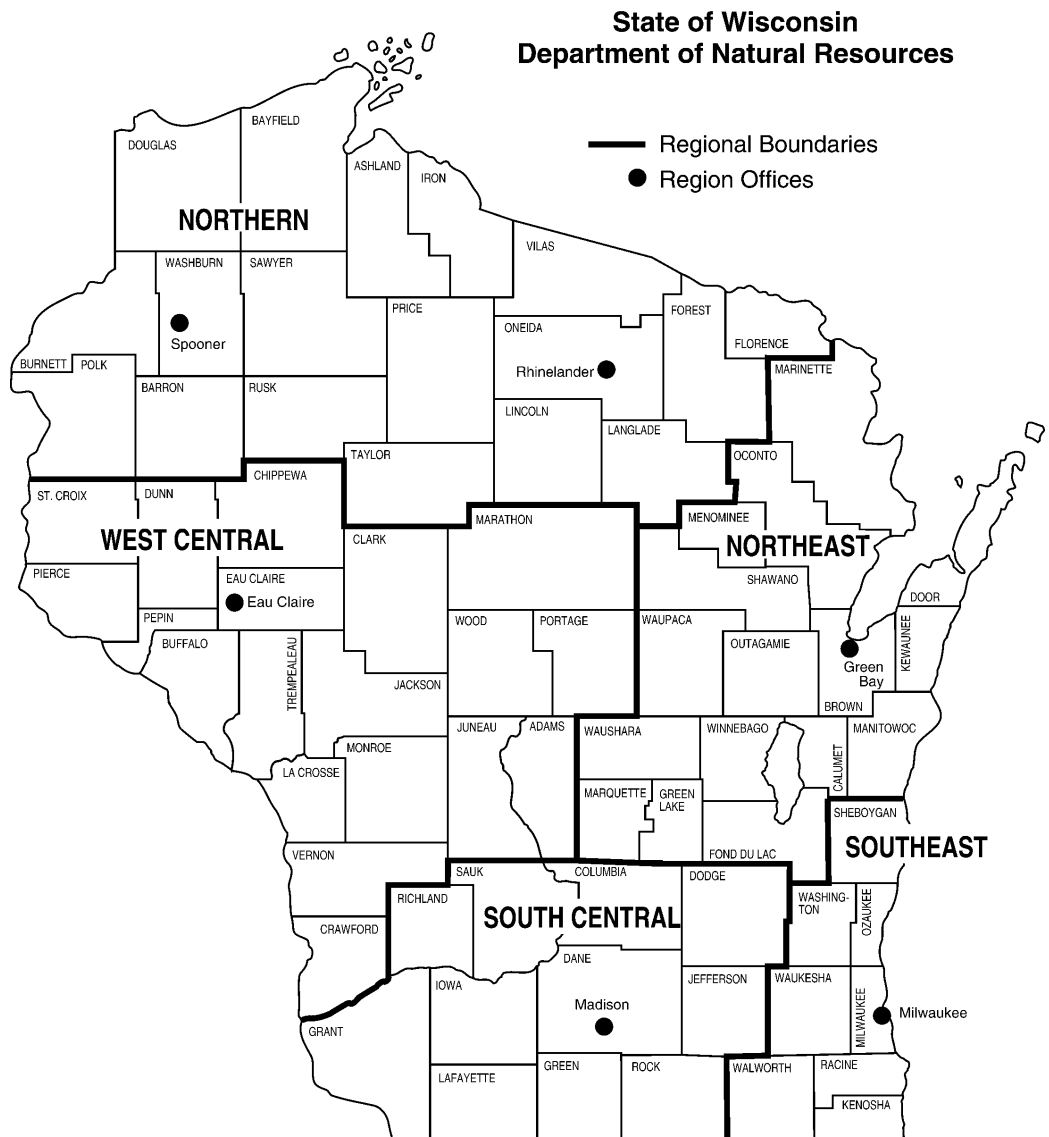
Environmental Grants Specialist  
Northeast Region  
1125 North Military Avenue  
P.O. Box 10448  
Green Bay, WI 54307-0448  
Telephone: 920-492-5800

Environmental Grants Specialist  
West Central Region  
1300 West Clairemont Avenue  
P.O. Box 4001  
Eau Claire, WI 54702  
Telephone: 715-839-3700

Environmental Grants Specialist  
South Central Region  
3911 Fish Hatchery Road  
Fitchburg, WI 53711  
Telephone: 608-275-3266

Environmental Grants Specialist  
Southeast Region  
2300 N. Dr. ML King Jr. Drive  
P.O. Box 12436  
Milwaukee, WI 53212  
Telephone: 414-263-8500

Environmental Grants Specialist  
Northern Region  
810 West Maple Street  
Spooner, WI 54801  
Telephone: 715-635-2101



REV 7/02